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CONFIRMATION NO. 3358

<b>SERIAL NUMBER</b> 10/046,504	<b>FILING OR 371(c) DATE</b> 10/19/2001 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1618	<b>ATTORNEY DOCKET NO.</b> P-9565-US
<b>APPLICANTS</b> Steven J. Siegel, Berwyn, PA; Karen I. Winey, Philadelphia, PA; Raquel E. Gur, Philadelphia, PA; Robert H. Lenox, Califon, NJ;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/242,304 10/20/2000				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 03/06/2002				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>                    </u> Examiner's signature <u>                    </u> Initials <u>                    </u>		<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 10
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> 49443				
<b>TITLE</b> Polymer-based surgically implantable haloperidol delivery systems and methods for their production and use				
<b>FILING FEE RECEIVED</b> 435	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	